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Bib Data Sheet

CONFIRMATION NO. 8587

<b>SERIAL NUMBER</b> 10/774,694	<b>FILING OR 371(c) DATE</b> 02/10/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1623	<b>ATTORNEY DOCKET NO.</b> 25464X	
<b>APPLICANTS</b> Irit Gil-Ad, Herzelia, ISRAEL; Abraham Weizman, Tel Aviv, ISRAEL;					
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/432,875 09/16/2003 which is a 371 of PCT/IL01/01105 11/29/2001 <i>ESD</i>					
<b>** FOREIGN APPLICATIONS *****</b> ISRAEL 139975 11/29/2000 <i>ESD</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/06/2004</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Ernst, Olson / ESD</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 60	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> Gary M. Nath NATH & ASSOCIATES PLLC 6th Floor 1030 15th Street, N.W. Washington, DC20005					
<b>TITLE</b> Anti-proliferative drugs					
<b>FILING FEE RECEIVED</b> 952	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		